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| PHILADELPHIA, 5/30/2006 CCHAU2 000 | PA 19103 000016 10766463 | | | Randolph | J. Huis | (Depositor's name) (Signature) | |
| 1 FC:2501 2 FC:8001 | 700.00 OP 30.00 OP 300.00 OP | | | 5/24/2006 | | | |
| APPLICATION NO. | FILING DATE | F | FIRST NAMED INVE | NTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | |
| 10/766,463 TITLE OF INVENTION: MICROSTRUCTURE | 01/28/2004 OPTICAL ASSEMBLY TO |) BE MOUNTED | Christian Remb | | LBP-PT033 NG PERIODIC MOVEMEN | 3164 FTS OF A | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FE | EE P | UBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | YES | \$700 | | \$300 | \$1000 | 06/12/2006 | |
| EXAM | IINER | ART UNI | IT C | CLASS-SUBCLASS |] | | |
| GEISEL, | KARA E | 2877 | | 356-023000 | | | |
| CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. | e address or indication of "Follonce address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO B | Correspondence | (1) the names of or agents OR, alt (2) the name of a registered attorne 2 registered pater listed, no name w | single firm (having as by or agent) and the nan at attorneys or agents. If will be printed. | a member a 2 | and Koenig, F | |
| | an assignee is identified be 137 CFR 3.11. Completion EE | | data will appear on Γ a substitute for fili (B) RESIDENCE: | | | document has been filed for | |
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| 4a. The following fee(s) are ☑ Issue Fee ☑ Publication Fee (No s ☑ Advance Order - # o | small entity discount permitte | | XXPayment by cre- | amount of the fee(s) is end dit card. Form PTO-203 hereby authorized by char | 8 is attached. arge the required fee(s), or cr | edit any overpayment, to tra copy of this form). | |
| a. Applicant claims S | (from status indicated above MALL ENTITY status. See | 37 CFR 1.27. | | | LL ENTITY status. See 37 (| | |
| The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rec | is requested to apply the Iss Publication Fee (if required) vords of the United States Pat | ue Fee and Publicat will not be accepted ent and Trademark | tion Fee (if any) or to if from anyone other Office. | o re-apply any previous than the applicant; a reg | ly paid issue fee to the applic sistered attorney or agent; or | cation identified above. the assignee or other party in | |
| Authorized Signature Typed or printed name | MA_ | - Huis | | Date | 5/24/2000 34,626 | | |
| | on is required by 37 CFR 1.3 | 11. The informatio | n is required to obta | | | nd by the USPTO to process) ing gathering, preparing, and | |

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFK 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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10/766,463

January 28, 2004

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| perior pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818 | |
| pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818) |). 10/766 462 |

Application Number

Filing Date

| FEE | TRANSMITTAL | |
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| | For FY 2006 | |

First Named Inventor Rembe et al. **Examiner Name** Kara E. Geisel Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2877

| TOTAL AMOUNT OF PAYN | MENT (\$) | 1,030.00 | | Attorney Docke | et No. LB | P-PT033 (20 1 | 30 Ka/ml) |
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| METHOD OF PAYMENT | METHOD OF PAYMENT (check all that apply) | | | | | | |
| Deposit Account De | Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 22-0493 Deposit Account Name: Volpe and Koenig, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | | rovide credit card |
| FEE CALCULATION (AI | | | | Iling or may be | Subject ic |) a Surcilarye | .) |
| 1. BASIC FILING, SEAR | FILING F <u>S</u> i | | SEAF | RCH FEES Small Entity | | ATION FEES Small Entity | · · · · · |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$ | | Fee (\$) | | Fees Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Small Entity Issue Fee, Publication Fee and Advanced Soft Copies 1030 | | | | | | | |

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| SUBMITTED BY | | | |
| Signature | WH | Registration No. (Attorney/Agent) 34,626 | Telephone 215-568-6400 |
| Name (Print/Type) | Randolph J. Huis | | Date 5/24/206 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents B.O. Box 1450, Alexandria, VA 22313-1450. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| TRANSMITTAL FORM Filing Date January 28, 2004 | - 5 | nder the Pa | perwork Reduction Act of 1995 | . no person | U.S. are required to respond to a c | Patent a | nd Trademark Office; U.S. DEPARTMENT OF COMMERCE of information unless it displays a valid OMB control number | | |
| FORM First Named Inventor Rembe et al. | | | | | | | | | |
| First Named Inventor Rembe et al. Art Unit 2877 Examiner Name Kara E. Geisel Attorney Docket Number LBP-PT033 (20 130 Ka/ml) ENCLOSURES (Check all that apply) ENCLOSURES (Check all that apply) ENCLOSURES (Check all that apply) Fee Transmittal Form Drawing(s) Appeal Communication to Board of Appeals and Interferences Amendment/Reply Petition Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Affidavits/dectaration(s) Request Terminal Disclaimer Request Request for Refund Drocument(s) (please Identification Disclosure Statement CD, Number of CD(s) Landscape Table on CD SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name VOLPE AND KOENIG, P.C. | TRANSMITTAL | | | Filing Date | Janu | anuary 28, 2004 | | | |
| Art Unit 2877 Examiner Name Kara E. Geisel Total Number of Pages in This Submission ENCLOSURES (Check all that apply) Fee Transmittal Form Drawing(s) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Petition Power of Attorney, Revocation Change of Correspondence Address Extension of Time Request Request Provisional Application Power of Attorney, Revocation Change of Correspondence Address Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Document(s) Reply to Missing Parts/Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name VOLPE AND KOENIG, P.C. | | | FORM | | First Named Inventor | | | | |
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| Appeal Communication to Board of Appeals and Interferences | X | Fee Trans | smittal Form | | Drawing(s) | | After Allowance Communication to TC | | |
| Amendment/Reply After Final After Final Power of Attorney, Revocation Change of Correspondence Address Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts under 37 CFR 1.52 or 1.53 Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Other Enclosure(s) (please Ident below): PTOL-85 Proprietary Information Status Letter Other Enclosure(s) (please Ident below): PTOL-85 Remarks SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name VOLPE AND KOENIG, P.C. | | X F | ee Attached | | | | Appeal Communication to Board of Appeals and Interferences | | |
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| Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 Status Letter Other Enclosure(s) (please Ident below): PTOL-85 | | | fter Final | | | | Proprietary Information | | |
| Extension of Time Request Express Abandonment Request Information Disclosure Statement Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name VOLPE AND KOENIG, P.C. | Affidavits/declaration(s) | | | | | | , I | | |
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| VOLPE AND KOENIG, P.C. | | | | | | | | | |
| VOLPE AND KOENIG, P.C. | | | SIGNA | TURE C | OF APPLICANT, ATTO | DRNEY | , OR AGENT | | |
| | Firm Na | ame | VOLPE AND KOENI | G, P.C. | · | | | | |
| Signature MU-H- | Signatu | ure | MH | | | | | | |
| Printed name Randolph J. Huis | Printed | l name | Randolph J. Huis | | | | | | |
| Date 5/24/2006 Reg. No. 34,626 | | | | | | | | | |
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| CERTIFICATE OF TRANSMISSION/MAILING | | | · c | ERTIFIC | CATE OF TRANSMISS | SION/N | MAILING | | |
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date shown below:

Signature

Typed or printed name Randolph J. Huis Date

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